

Town of Halfmoon 2 Halfmoon Town Plaza Halfmoon, NY 12065 371-7410 ext. 2266 Fax: 371-0304 Building and Planning Departments

Stormwater Application

for Soil Disturbance Permits & Requests for NOI/SWPPP Acceptance & Notices of Termination

	Det	oai tillelits	Application Date:
			Fee:
	e disturbed Acceptance Form: S	or \$50 per lot, whichever is	Permit #:
		dential -	nor OR Commercial) ermination
Business/Project Name:			
Address/Location:			
Property Owner:			
Address:		Date of I	Birth/Employer ID#:
Phone:	Email:		Fax:
Business Representative: _			
Address:			
Phone:	Email:		Fax:
Contractor/Builder:			
Address:			
			Fax:
Site: a. Number of Lots: b. Town Zoning Code:		, ,	
c. Size of total project:	acres	Area to be disturbed:	acres
d. Type of work proposed:			
e. Has a SPDES General Permi	please provide a copy	of the NOI (Notice of Inter	Activity been applied for? at) Acknowledgement Letter from NYSDEC Prevention Plan on site at all times. **
			Date:
(For Department Use Only)			
Action: Approved Disapprove	ed 🗌 Reason for Disapp	proval:	
Building Dept. (Signature):		C	ate:
Planning Dept./Stormwater Management Officer (Signature):			Date: